

Figure 1

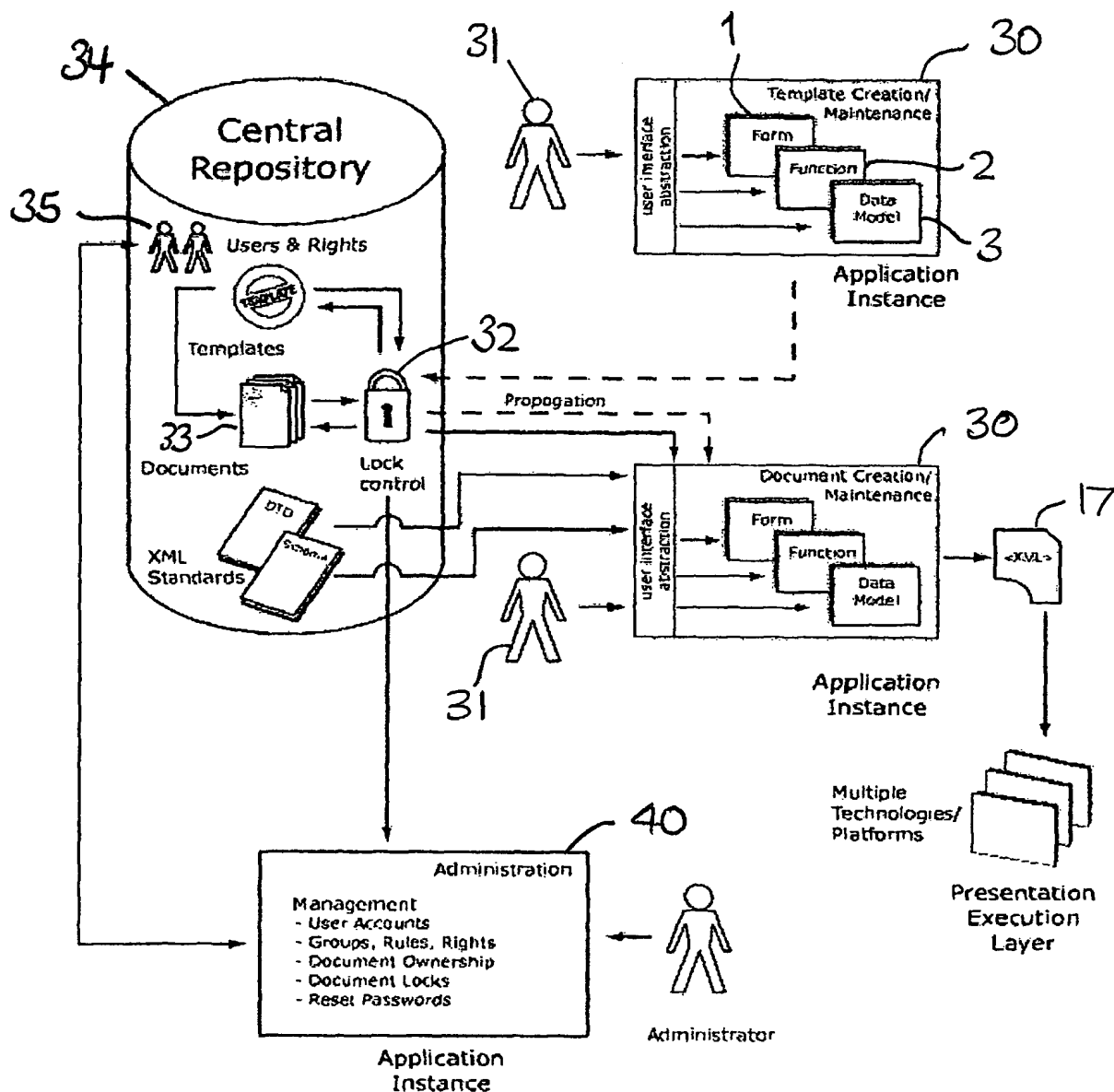


Figure 2

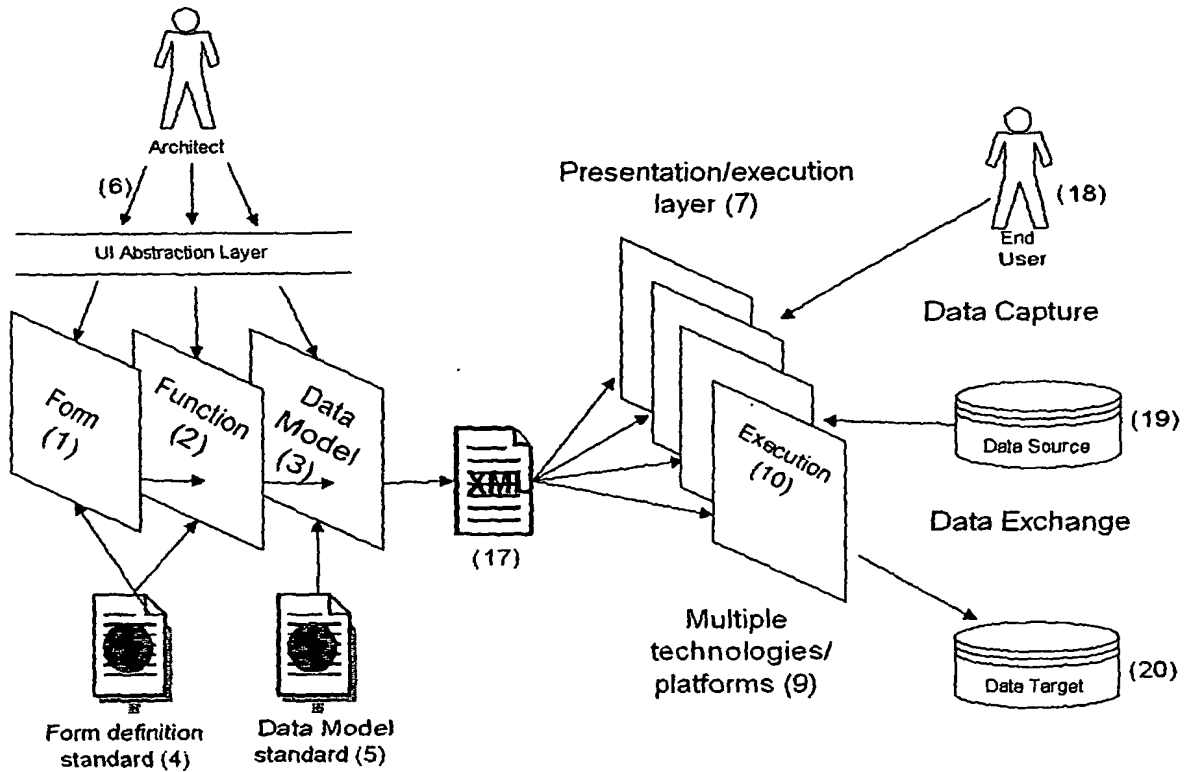


Figure 3

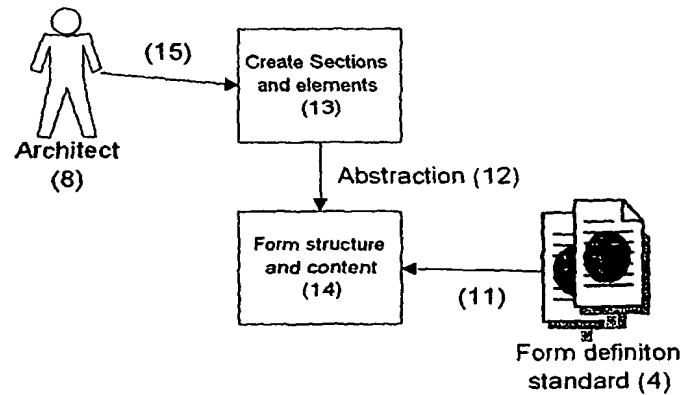


Figure 4

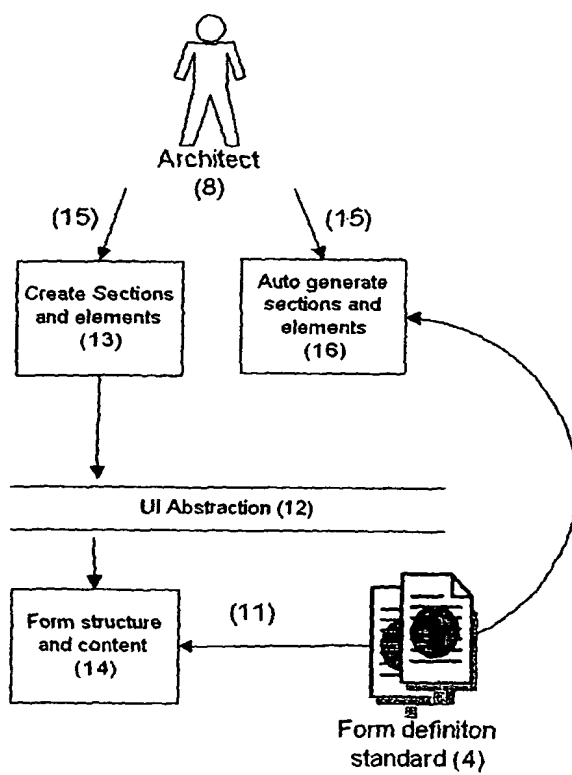


Figure 5

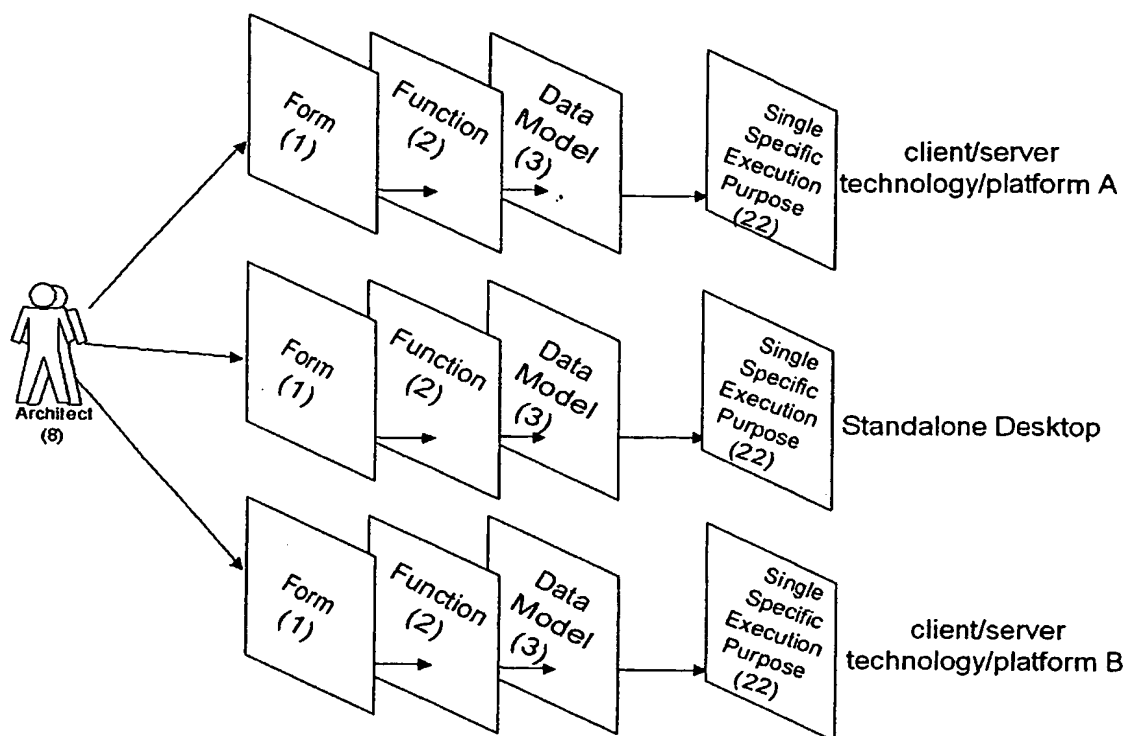


Figure 6

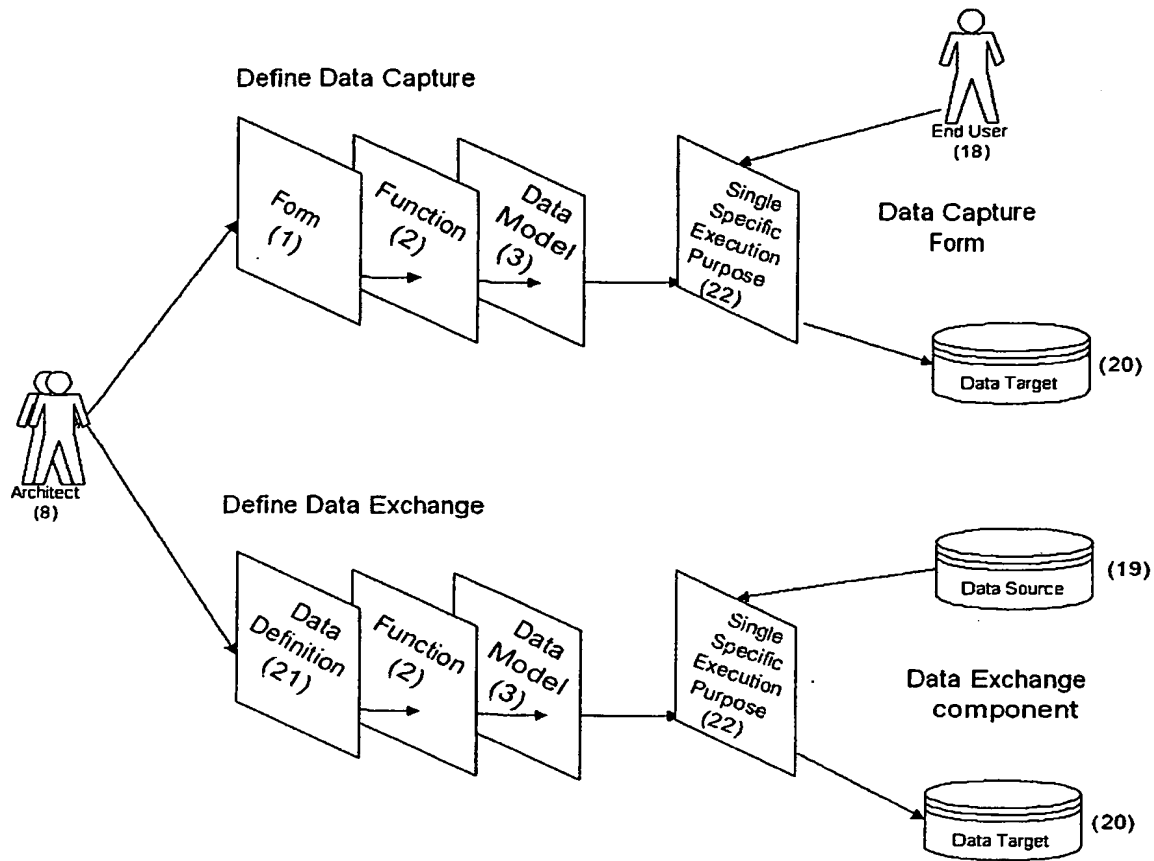


Figure 7

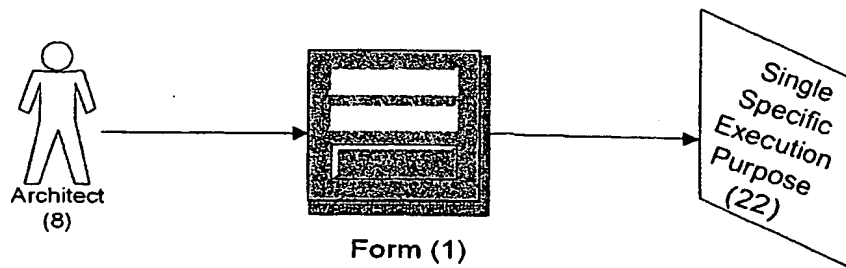


Figure 8

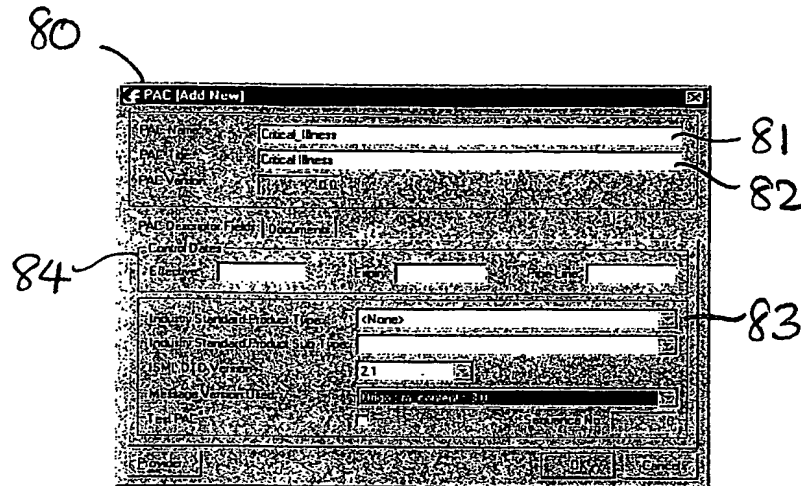


Figure 9

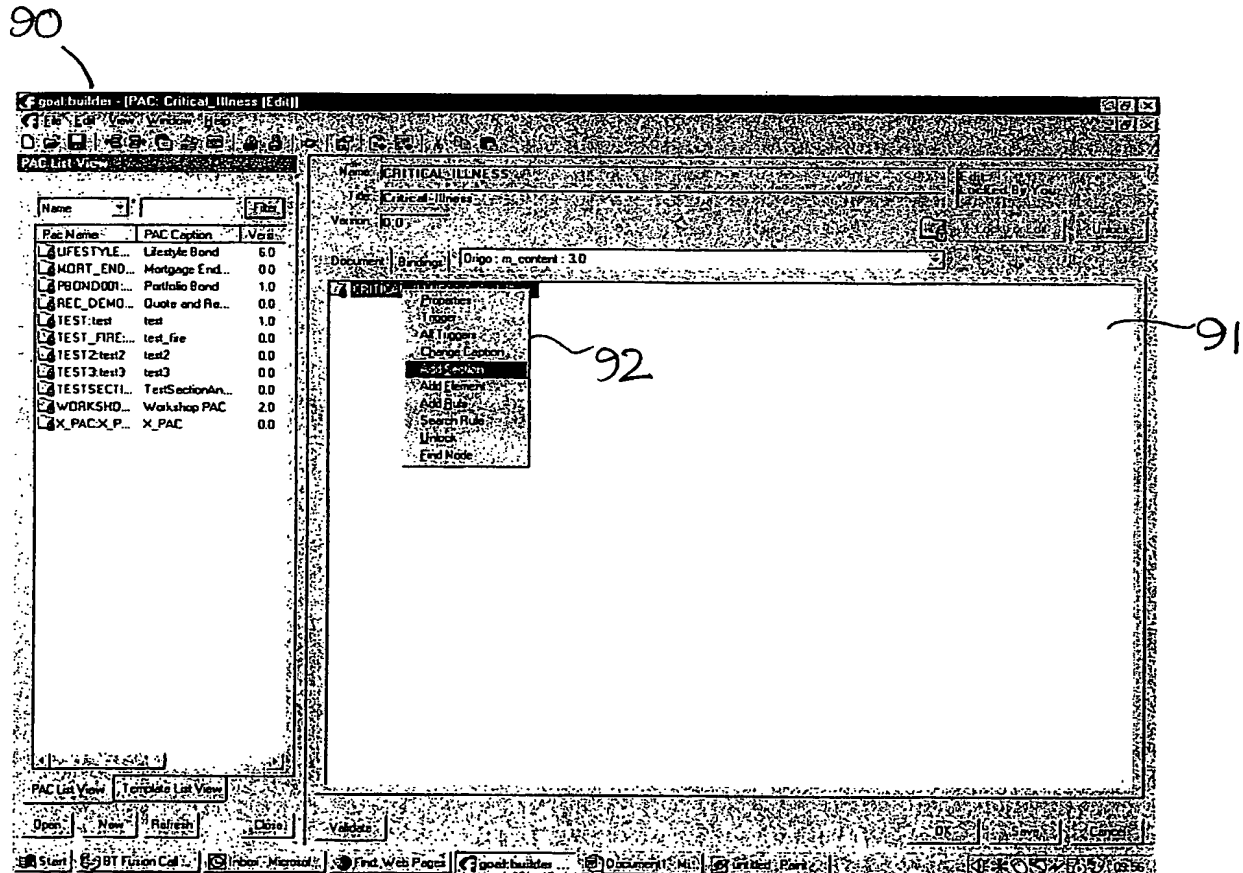


Figure 10

100

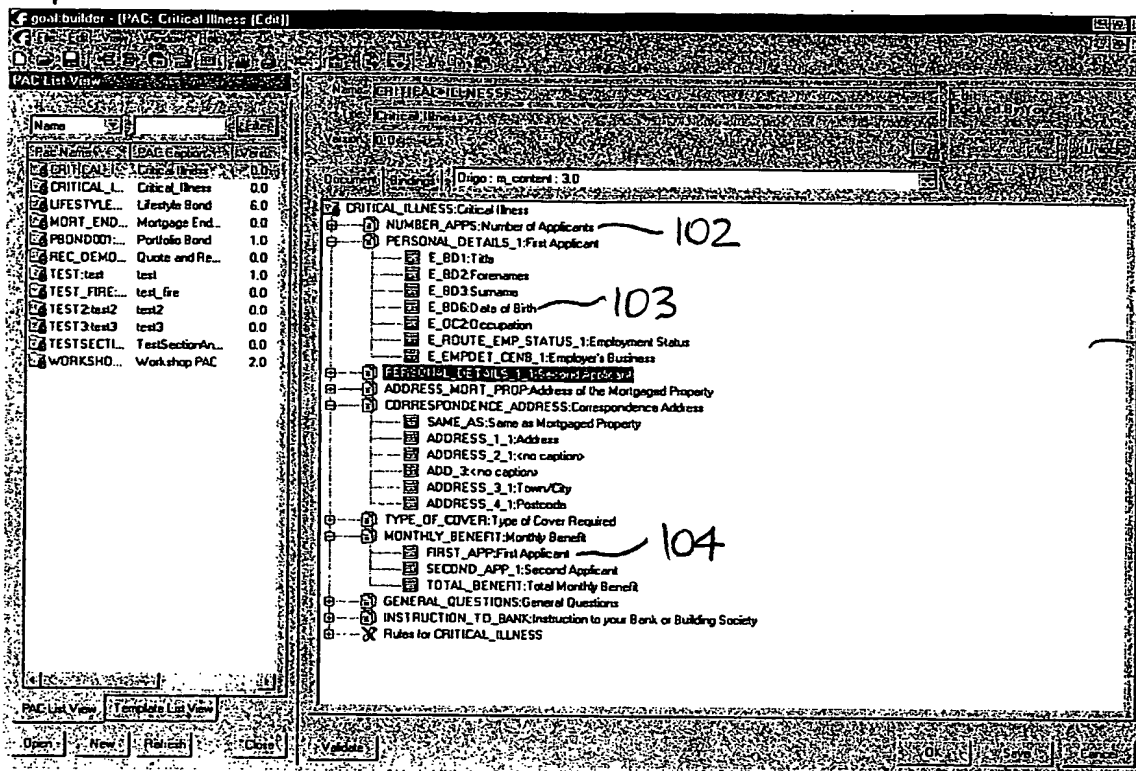


Figure 11

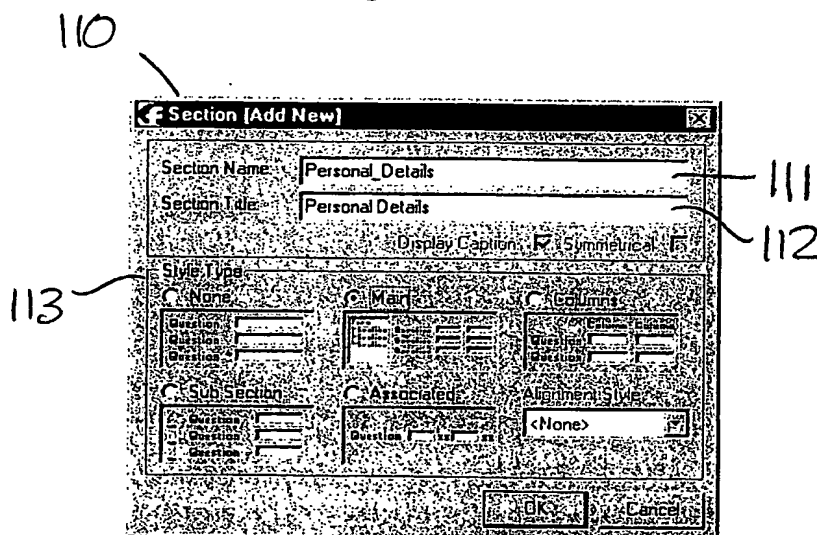


Figure 12

120

121

122

124

123

Figure 13

130

131



Figure 14

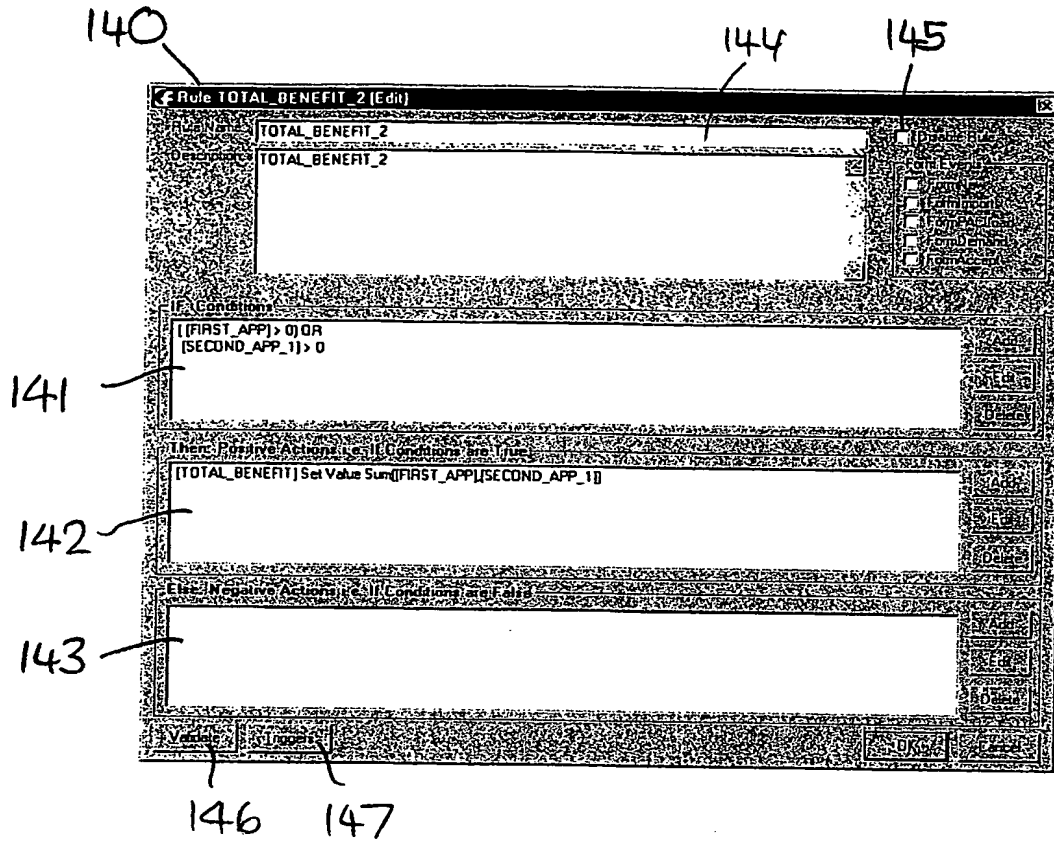


Figure 15

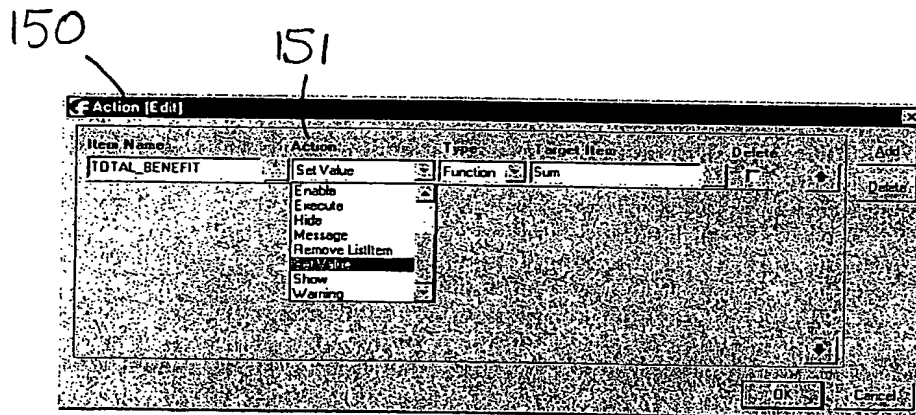


Figure 16

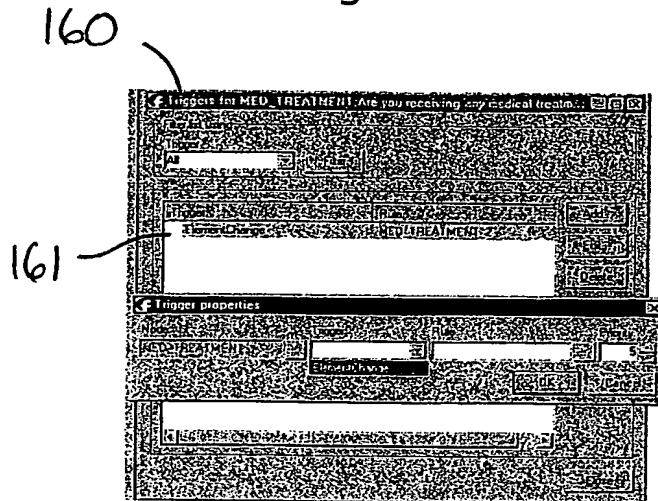


Figure 17

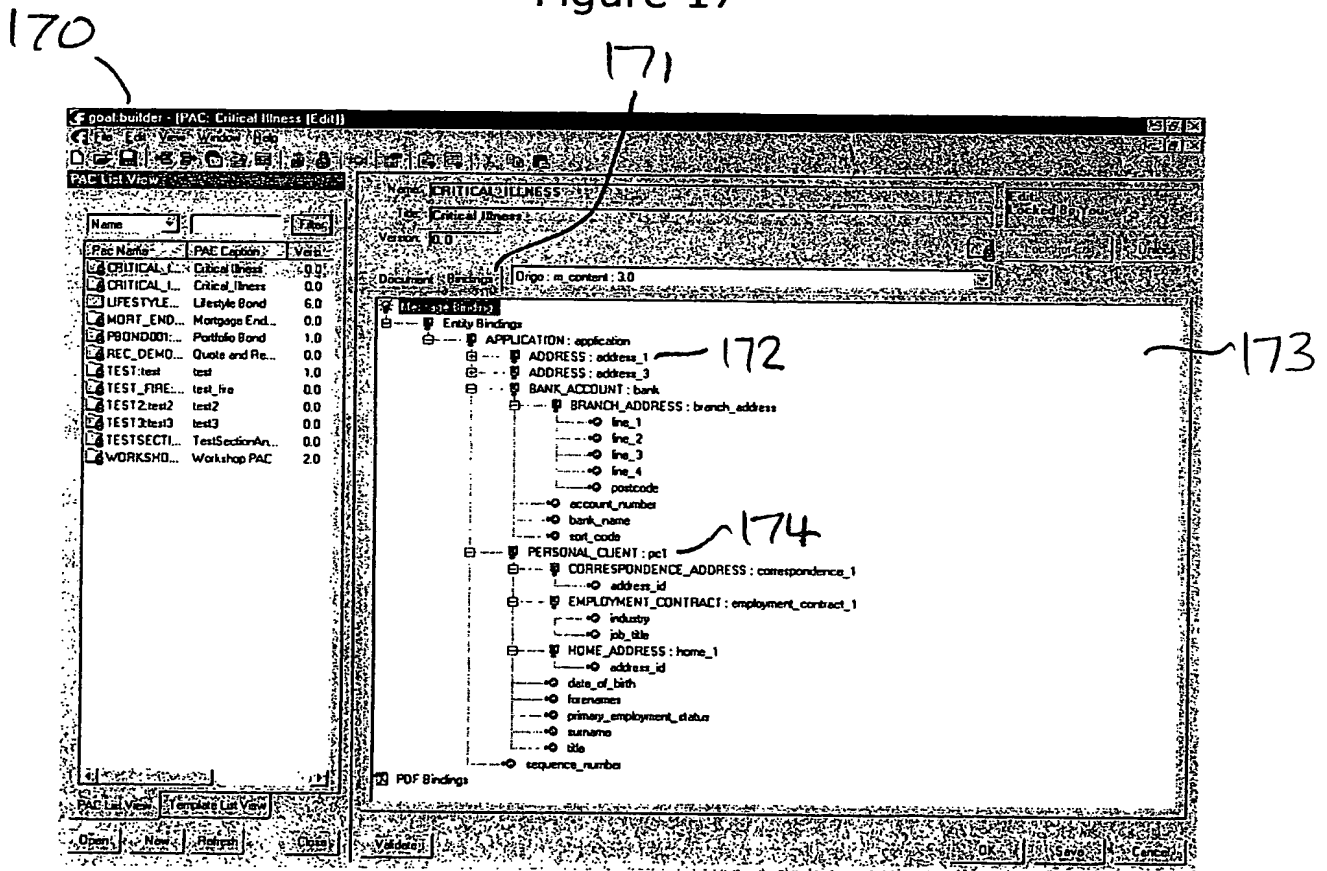


Figure 18

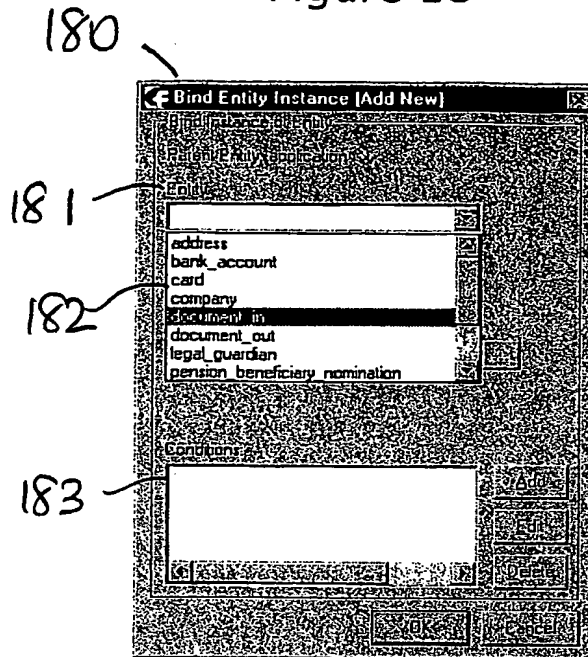


Figure 19

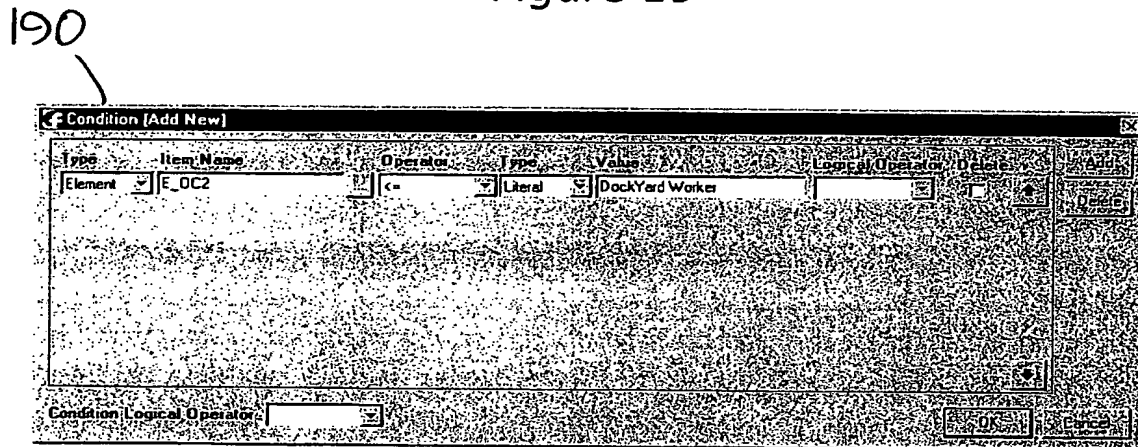


Figure 20

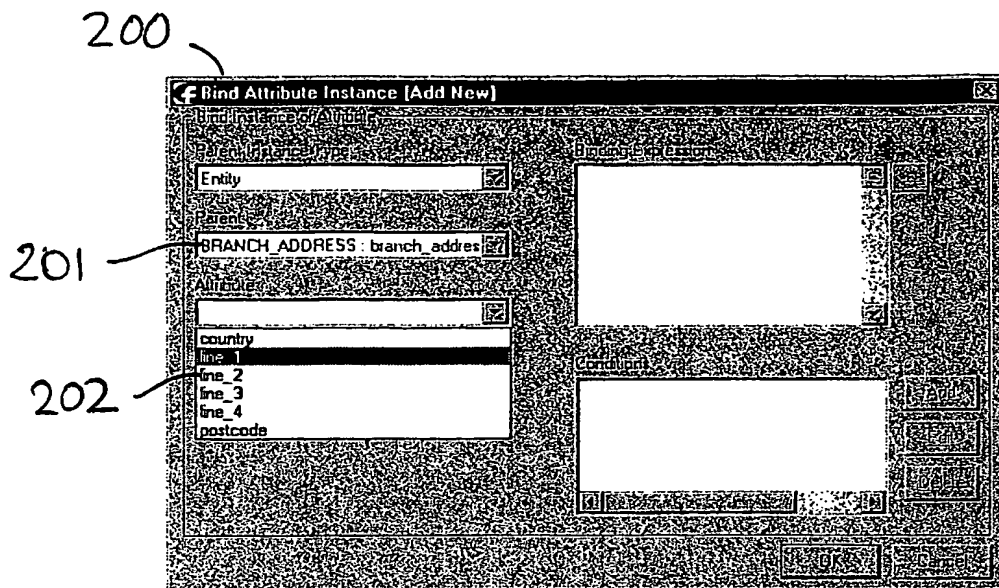


Figure 21

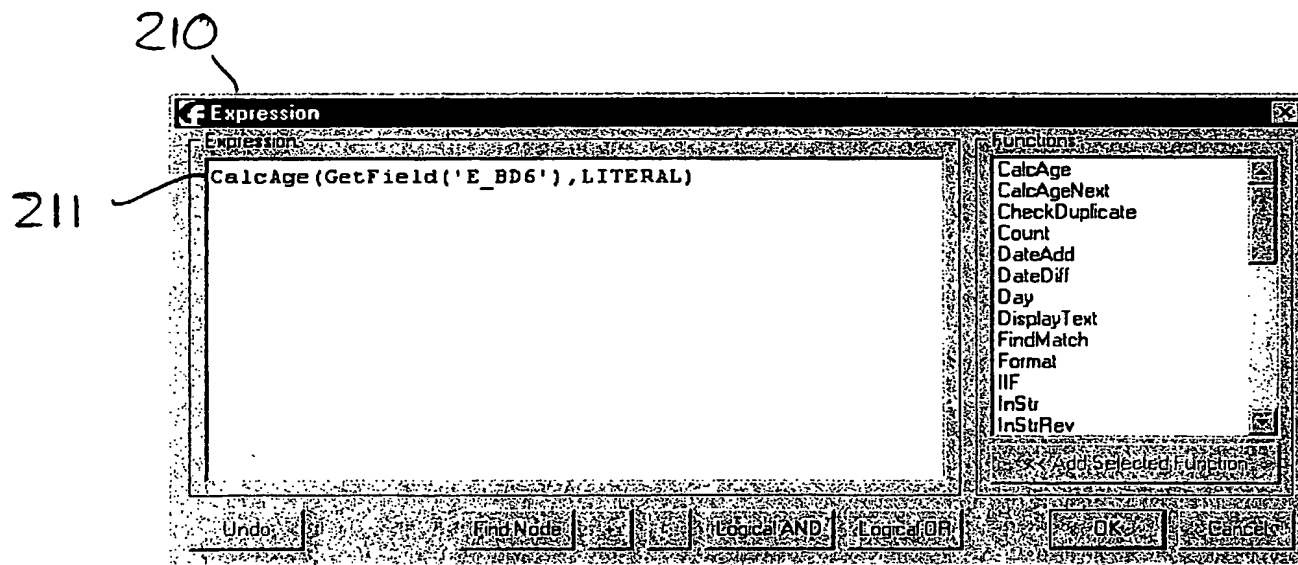


Figure 22

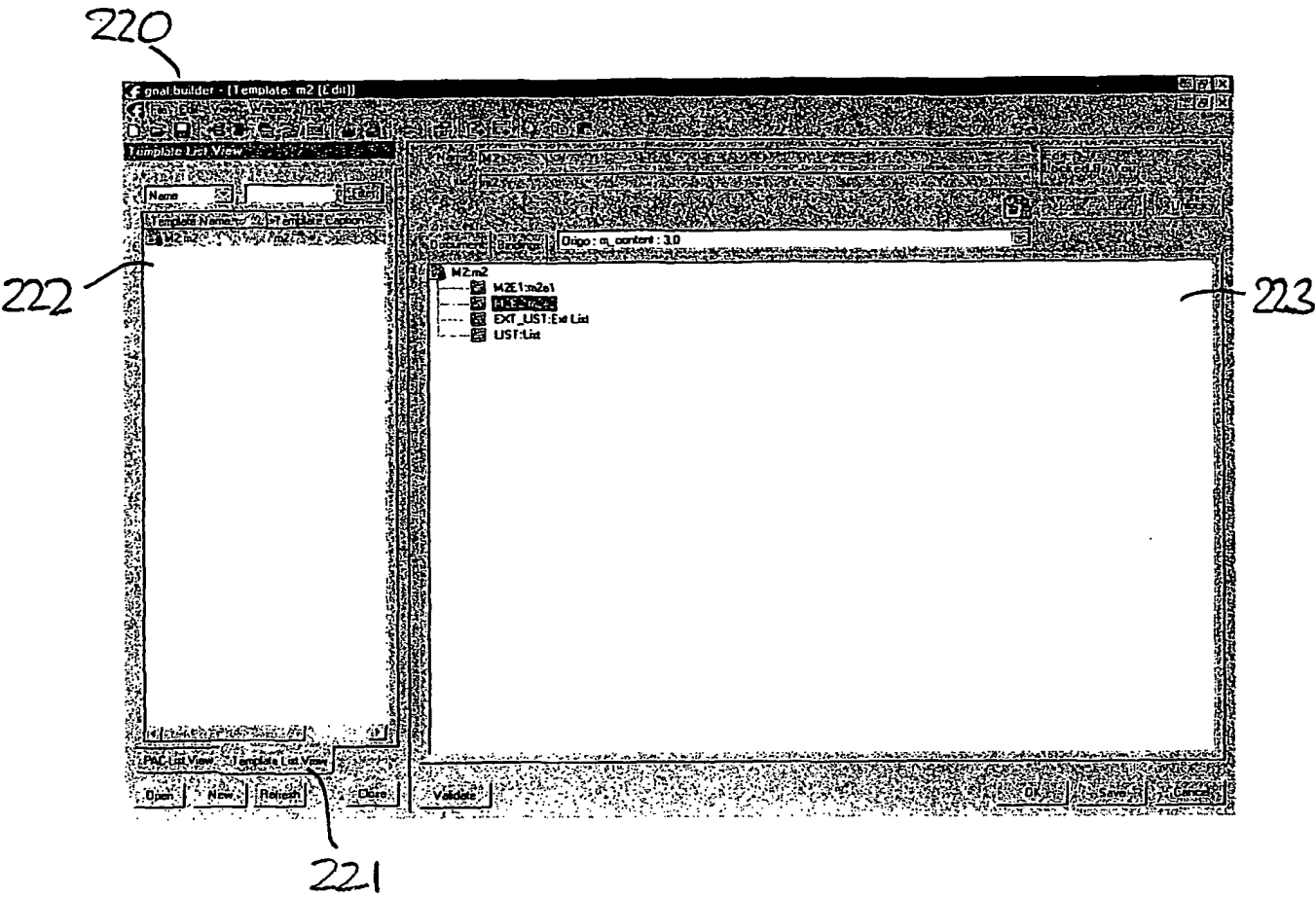


Figure 23

230

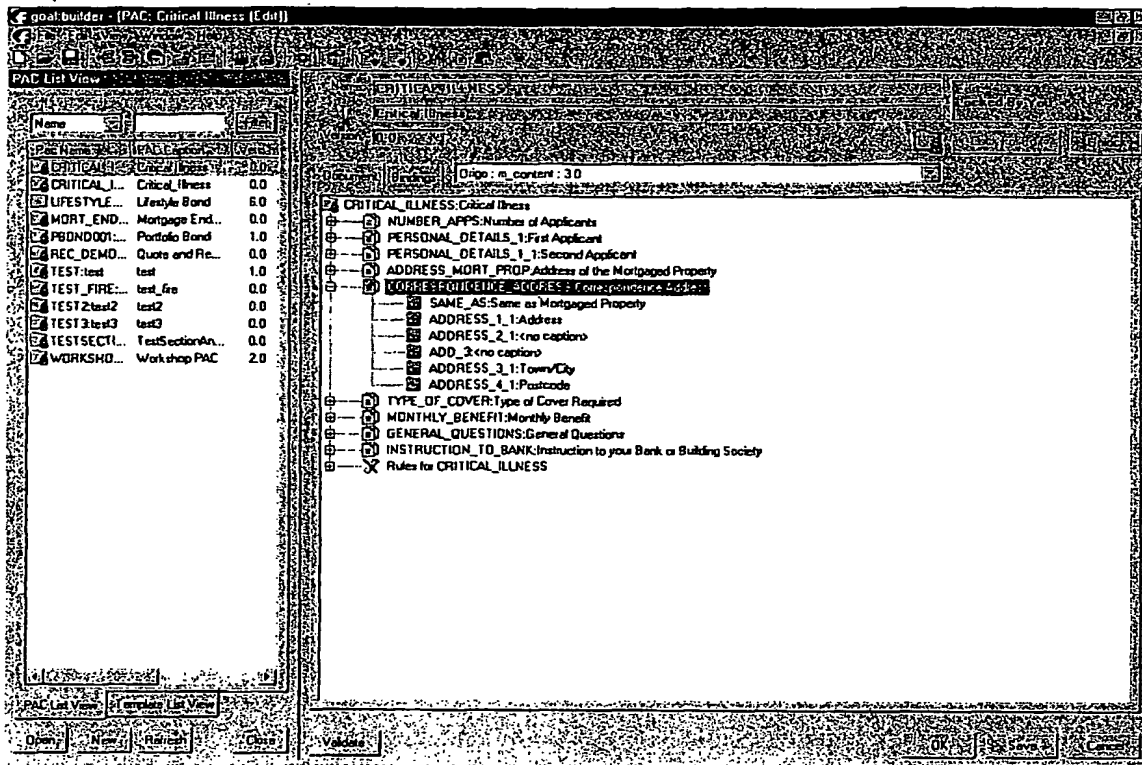


Figure 24

240

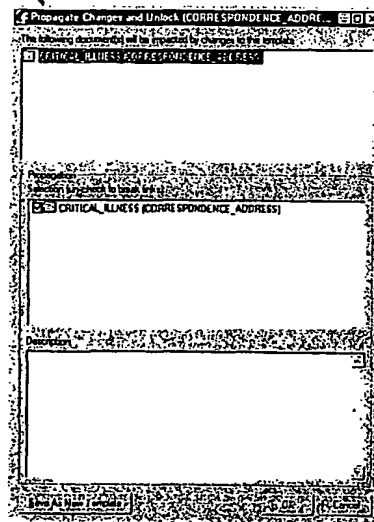


Figure 25

250

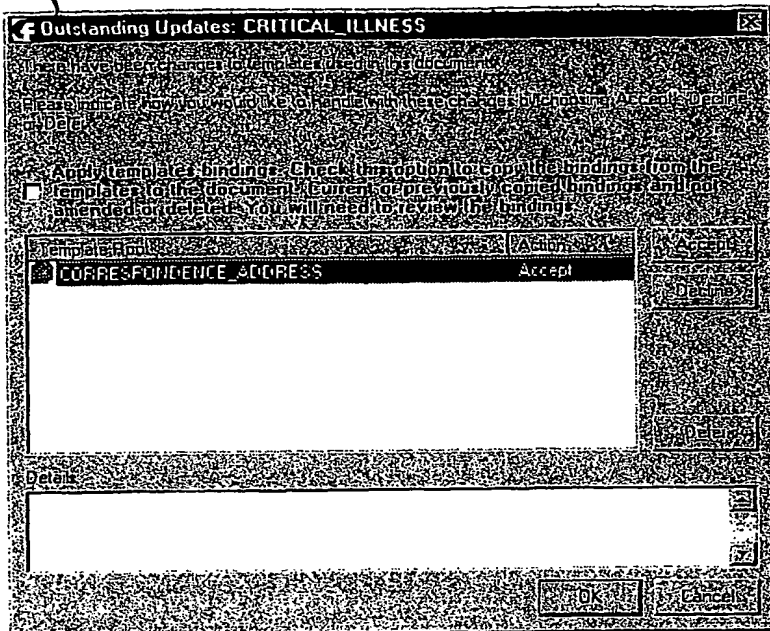


Figure 26

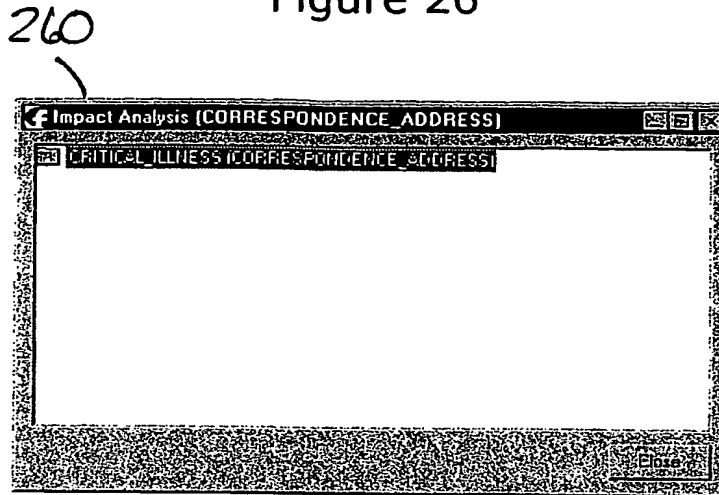


Figure 27

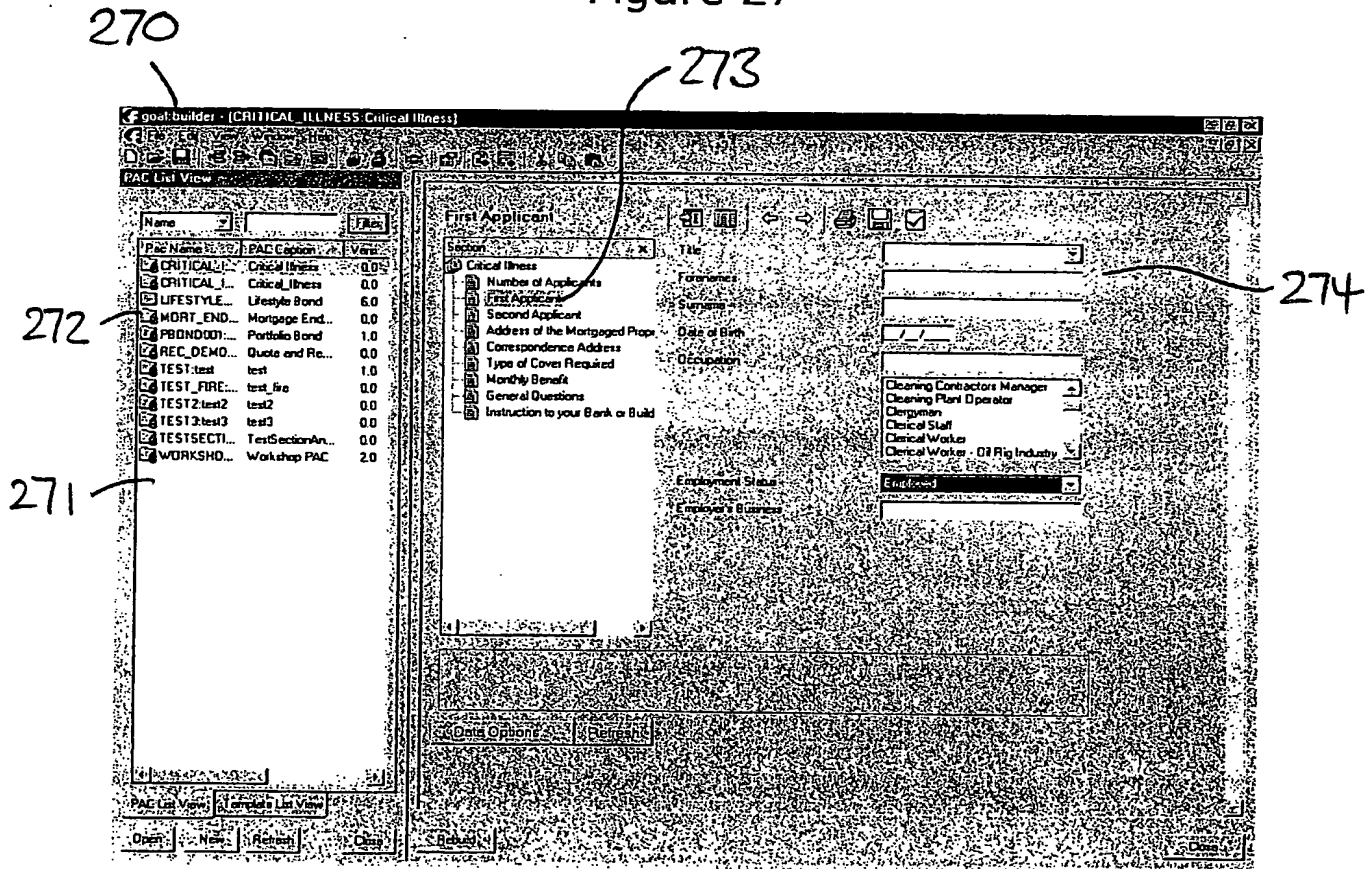




Figure 28

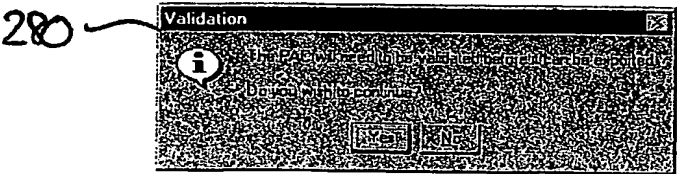


Figure 29

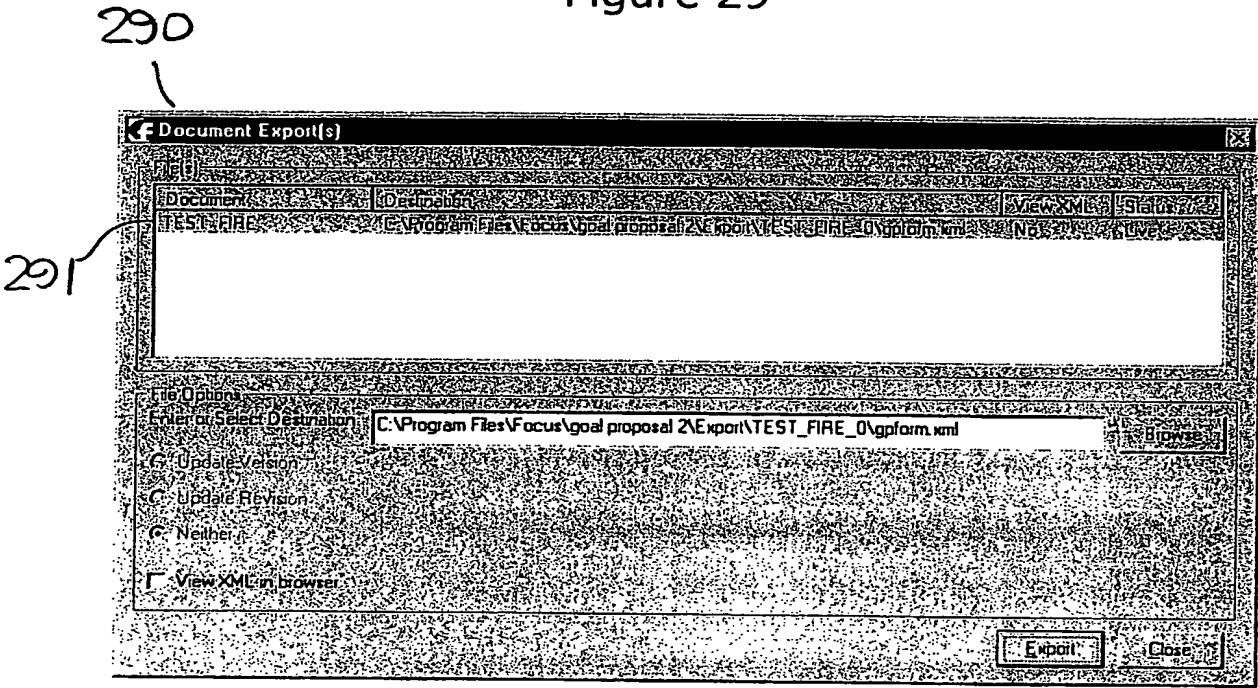


Figure 30

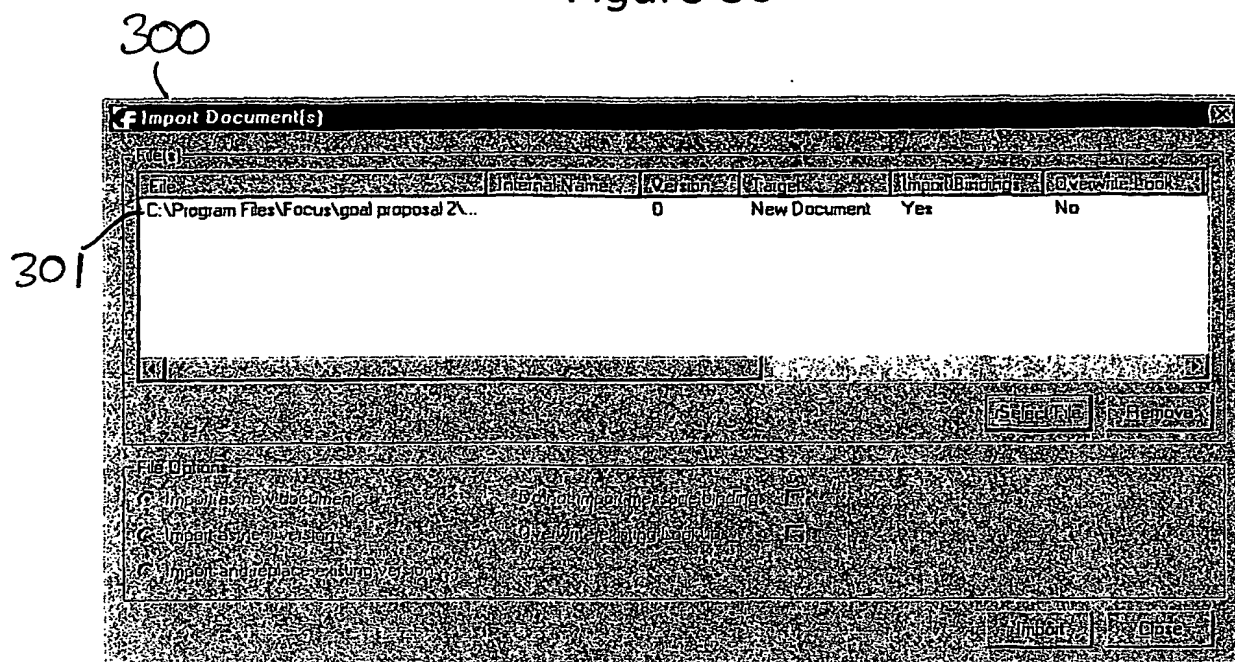


Figure 31

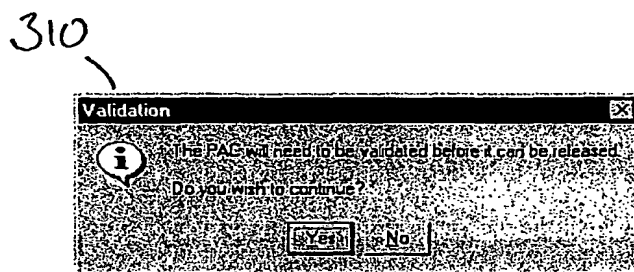


Figure 32

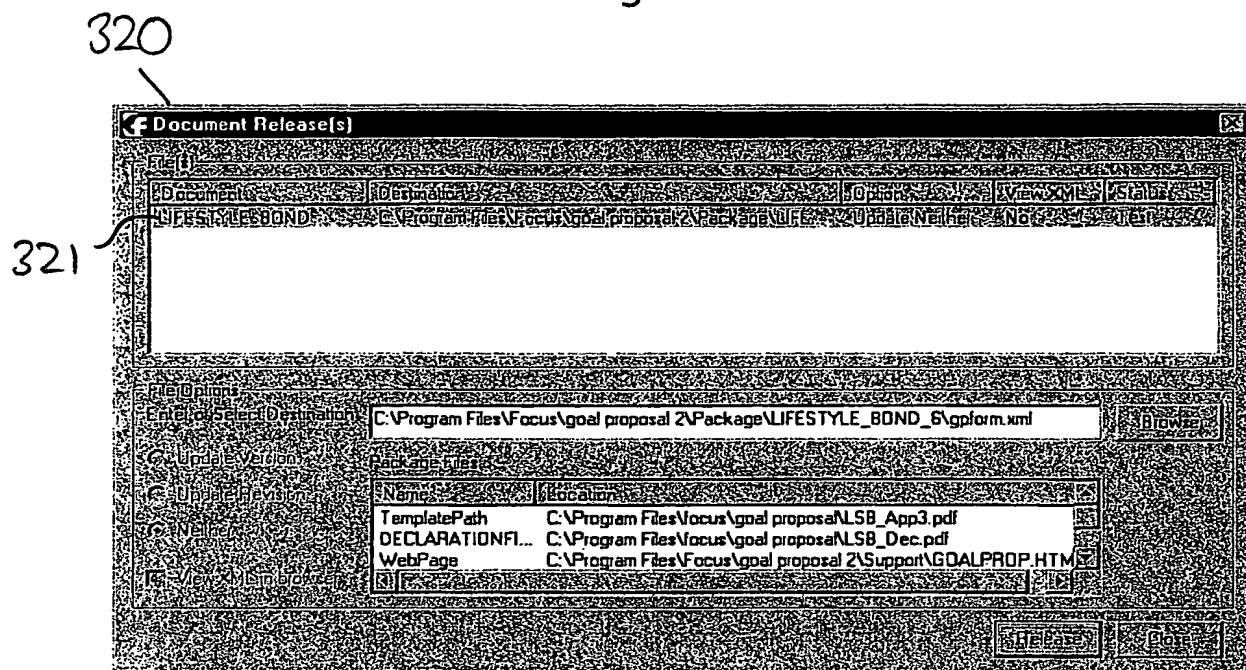


Figure 33

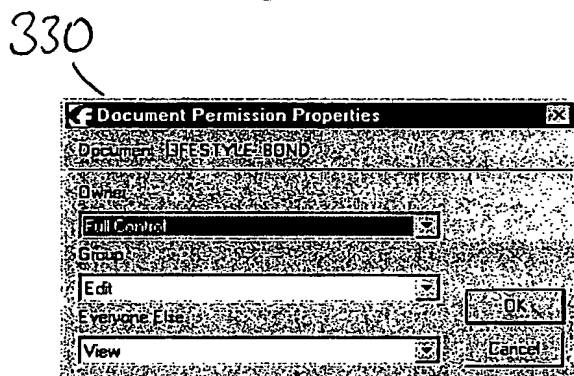


Figure 34

340

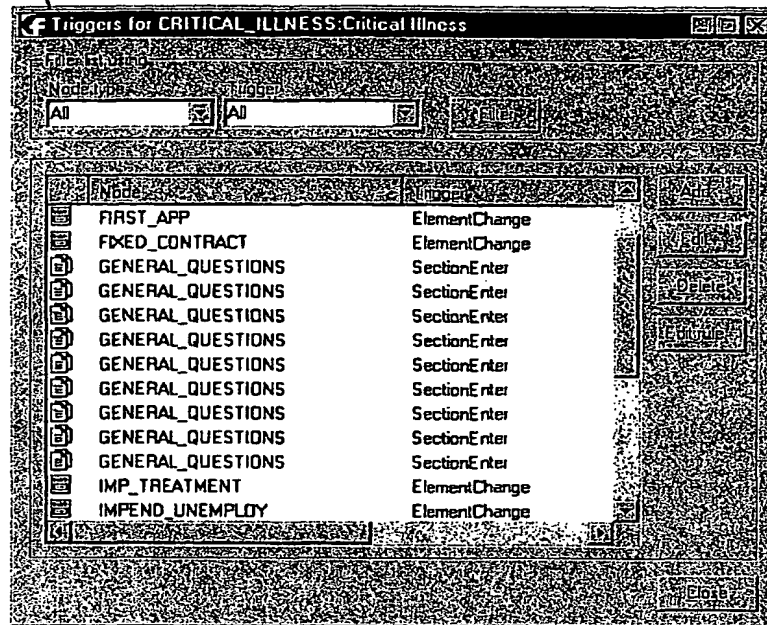


Figure 35

350

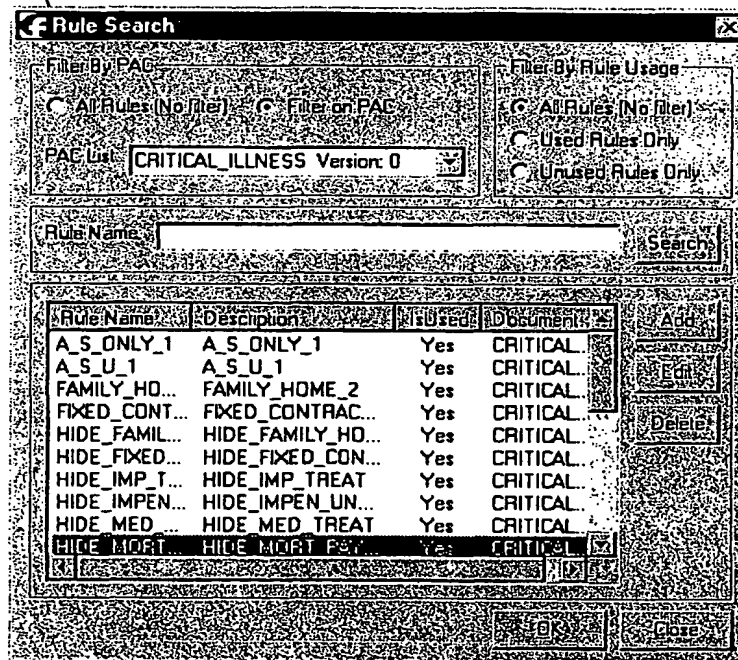


Figure 36

360

Repair Rule: TOTAL\_BENEFIT\_1

Available Nodes:

- ☒ A\_S\_U: Accident, Sickness and Unemployment
- ☒ ADD\_3
- ☒ ADDRESS\_1\_1: Address
- ☒ ADDRESS\_2\_1:
- ☒ ADDRESS\_3\_1: Town/City
- ☒ ADDRESS\_4\_1: Postcode
- ☒ ADDRESS\_MORT\_PROPR: Address of the Mortgaged Property

NEW AVAILABLE NODES:

- ☒ FIRST\_APP\_1
- ☒ SECOND\_APP\_1: Second Applicant

Remove Mapping

OK Cancel

Figure 37

370

371

The screenshot shows a web application window titled "CRITICAL\_ILLNESS: Critical Illness". On the left, a sidebar menu (labeled 371) lists various sections: "Critical Illness", "Number of Applicants", "First Applicant", "Second Applicant", "Address of the Mortgaged Property", "Correspondence Address", "Type of Cover Required", "Monthly Benefit", "General Questions", and "Instruction to your Bank or Building Society". The main content area (labeled 372) is a large, empty form. At the bottom of the window, there are buttons for "Data Options", "Refresh", "Return", and "Close".

Figure 38

370

371

goal viewer [1.04.0026] : Critical Illness (my\_prov\_name) - Microsoft Internet Explorer

http://127.0.0.1/ssr\_web/test55/frameSet.html

Number of Applicants	Number of Applicants
First Applicant	Number of Applicants
Second Applicant	
Address of the Mortgaged Property	
Correspondence Address	
Type of Cover Required	
Monthly Benefit	
General Questions	
Instruction to Your Bank or Building Society	

to do List Save Save and Print Validate & Accept Cancel & Exit

Done Internet

373





Figure 40

390

goal viewer (1.04.0026) : Critical Illness (my\_prov\_name) - Microsoft Internet Explorer

Address: http://127.0.0.1/ss\_web/test55/homeSet.html

Number of Applicants	First Applicant
First Applicant	
Second Applicant	
Address of the Mortgaged Property	
Correspondence Address	
Type of Cover Required	
Monthly Benefit	
General Questions	
Instruction for your Bank or Building Society	

First Applicant	Mr	391
Surname	Steven John	392
Surname	Brown	393
Date of Birth	12/1/1970	394
Occupation	Accountant	395
Employment Status	Employed	396
Employer's Business	Self Employed	
	Retired	
	Not Employed	

Go to do List Save Save and Print Validate/ Accept Cancel & Exit

Done Internet

Figure 41

410

CRITICAL ILLNESS: Critical Illness

General Questions 411

412

413

Number of Applicants

First Applicant

Second Applicant

Address of the Mortgaged Property

Correspondence Address

Type of Cover Required

Monthly Benefit

General Questions

Instruction to your Bank or Building Society

Do you receive any medical aid? ☐ No ☐ Yes

Do you have any medical conditions? ☐ No ☐ Yes

Have you suffered from any illness in the last 12 months? ☐ No ☐ Yes

Is there anyone to be used for any purpose other than your private family home? ☐ No ☐ Yes

Do you permanently live outside the United Kingdom? ☐ No ☐ Yes

Do you work less than 16 hours per week? ☐ No ☐ Yes

Do you have any other sources of income? ☐ No ☐ Yes

Are you on a fixed term contract? ☐ No ☐ Yes

Have you failed to pay a mortgage repayment in the last 6 months? ☐ No ☐ Yes

Data Options Refresh

Rebuild

Figure 42

420

**CRITICAL ILLNESS: Critical Illness**

**General Questions**

- ☐ Critical Illness
- ☐ Number of Applicants
- ☐ First Applicant
- ☐ Second Applicant
- ☐ Address of the Mortgaged Property
- ☐ Correspondence Address
- ☐ Type of Cover Required
- ☐ Monthly Benefit
- ☐ General Details
- ☐ Instructions

**Details**

Hip operation less than 1 month

**Data Options** **Refresh**

**Print** **Date**

Handwritten annotations: 421, 422, 423, 424

Figure 43

goalviewer (1.04.0026) - Critical Illness (my\_prov\_name) - Microsoft Internet Explorer

Address: http://127.0.0.1/ssr\_web/test55/frameSet.html

Number of Applicants:

First Applicant:

Second Applicant:

Address of the Mortgaged Property:

Correspondence Address:

Type of Cover Required:

Monthly Benefit:

**General Questions**

Instruction to your Bank or Building Society:

Are you receiving any medical treatment? ☐ Yes ☐ No

Do you know of any impending treatment? ☐ Yes ☐ No

Have you suffered from any illness in the last 12 months? ☐ Yes ☐ No

Is the property to be used for any purpose other than your or your family home? ☐ Yes ☐ No

Do you permanently live outside the United Kingdom? ☐ Yes ☐ No

Do you work less than 16 ☐ Yes ☐ No

Go to list Save Save and Print Validate & Accept Cancel & Exit

Done

Figure 44

10/516898

goal viewer (1.04.0026) : Critical Illness (my\_plov\_name) : Microsoft Internet Explorer

Address: http://127.0.0.1/ssi\_web/test55/frameSet.html

Number of Applicants: 2  
First Applicant: 1  
Second Applicant: 1  
Address of the Mortgaged Property:  
Correspondence Address:  
Type of Cover Required:  
Monthly Benefit:

General Questions

Are you receiving any medical treatment? ☐ Yes ☒ No

Do you know of any impending treatment? ☒ Yes ☐ No

Show

Have you suffered from any

Instruction Bank of Bull Society

Hip operation in less than 1 month

OK Cancel

Done

Start goal viewer (1.04.0026)

12:03 PM

Figure 45

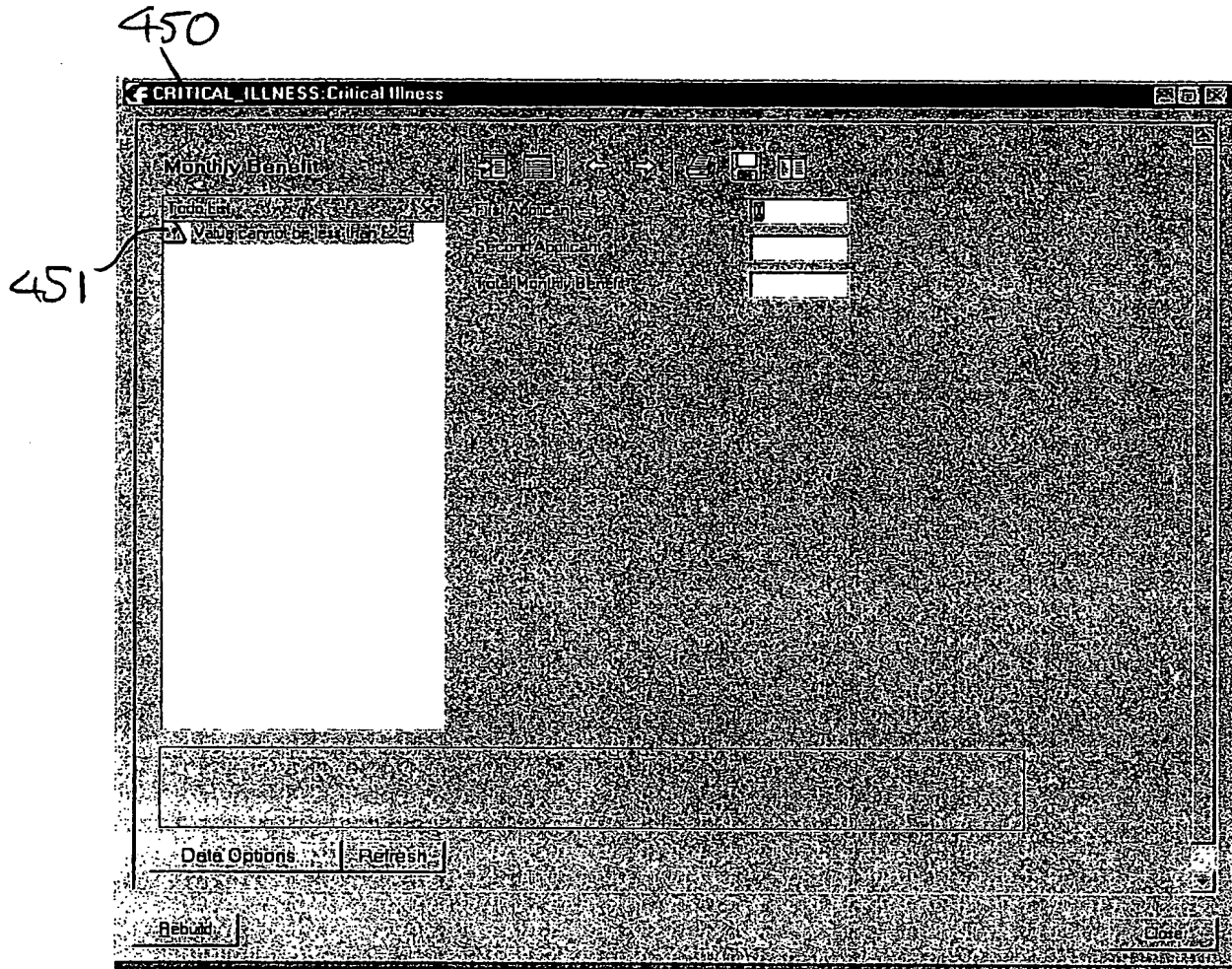


Figure 46

460

CRITICAL ILLNESS

Instruction to your Bank 076

Section

- Critical Illness
- Number of Applicants
- First Applicant
- Second Applicant
- Address of the Mortgaged Property
- Correspondence Address
- Type of Cover Required
- Monthly Benefit
- General Questions
- Instruction to your Bank 080

Name of the Bankholder

HSBC

Address

11 High Street

Town/Village

Winslow

County

Oxfordshire

Postcode

OX124EE

Name of Account Holder

Steven John Brown

Account Number

788686876

Signature

78

Critical Illness

Do you want to continue with this application?

Do you want to save the application and lock it now?

Yes No

Data Options Refresh

Rebuild



Figure 47

goal viewer (1.04.0026) - Critical Illness [my\_prov\_name] - Microsoft Internet Explorer

Address: http://127.0.0.1/ssr\_web/test55/nameSel.html

Monthly Benefit

The value is less than the minimum allowed for the field. [25] [First Applicant]

EO

Second Applicant

Total Monthly Benefit

to-do List Save Save and Print Validate & Accept Cancel & Exit

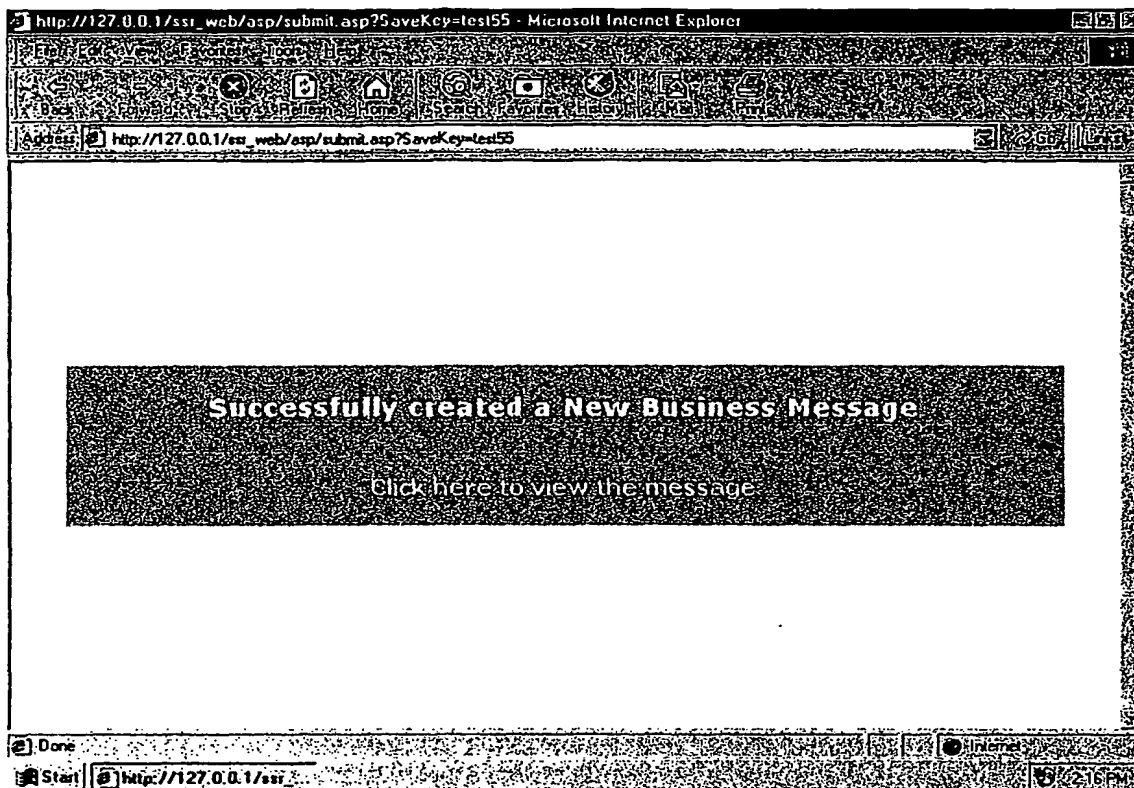
Done

Start goal viewer (1.04.002)

6:21 PM



Figure 48



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